## NON-PROVISIONAL UTILITY PATENT APPLICATION TRANSMITTAL - 37 CFR 1.53(b)

[ ] Duplicate (check, if applicable)

MAIL STOP PATENT APPLICATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Attorney Docket No.: 9203-21U4 C First Named Inventor: Wilbur H. Highleyman C Express Mail Label No.: EV312206977US C Total Pages of Transmittal Form: 2-

Transmitted herewith for filing is the non-provisional utility patent application entitled:

# SPLIT PROCESSING SYSTEM FOR PROVIDING INCREASED SYSTEM AVAILABILITY

which is a Continuation of prior Application No. 10/368,316 filed February 13, 2003.

[X] This non-provisional patent application is based on Provisional Patent Application Nos. 60/357,034 filed February 14, 2002 and 60/411,720 filed September 17, 2002.

#### Enclosed are:

- [X] Specification (including Abstract) and claims: 54 pages.
- [X] 23 sheets of drawings (formal).
- [X] Copy of Declaration from prior Application No. 10/368,315.
- [X] Applicants, by their undersigned attorney, claim Small Entity Status under 37 C.F.R. §1.27 as [] an Independent Inventor, or [X] a Small Business Concern, or [] a Non-Profit Organization.
- [X] Information Disclosure Statement, PTO/SB/08A, and cited references.

### The filing fee is calculated as follows:

医原式的复数形式 人名西西西西西 经基础帐户			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE:			BASIC FEE:	
			\$385		1.15	\$770	
Total	24 - 20 =	4	X9	\$36.00	OR	X18	\$00.00
Independent	2 - 3 =	-0-	X43	\$00.00	OR	X86	\$00.00
[ -0- ] Multiple Dependent Claims Present			\$145	\$00.00	OR	\$290	\$00.00
		TOTAL	\$421.00	OR	TOTAL	\$00.00	

- [ ] The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts
- [X] A check in the amount of \$421.00 to cover the filing is enclosed.

[X]	The Commissioner is hereby authorized to charge and/or credit Deposit Account						
	No. 50-1017 (Billing No. 209203.0037) as noted below. A duplicate copy of this						
	sheet is enclosed.						
	[X]	Any overpayments or deficiencies in the above-calculated fee.					
	[]	Filing fee in the amount of \$ as calculated above.					
	[X]	Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.					
	[X]	In the event that a Petition for Extension of Time is required during the					
•		prosecution of this application, but not submitted, please charge any					
	4	extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted					
		above.					

## **CORRESPONDENCE ADDRESS**

N	ovem	ber	3.	2003	By:
,					

(Date)

CLARK A. JABLON

Registration No. 35,039

**AKIN GUMP STRAUSS HAUER & FELD LLP** 

One Commerce Square

2005 Market Street, Suite 2200 Philadelphia, PA 19103-7013

Telephone: 215-965-1200

Direct Dial: 215-965-1293

Facsimile: 215-965-1210

E-Mail: cjablon@akingump.com

[X] Customer Number or Bar Code Label: 000570

CAJ:vlb Enclosures